## WEST VIRGINIA OFFICE OF ATTORNEY GENERAL Health Spa Surety Bond

В	Bond No.:
KNOW ALL MEN BY THESE PRESENTS:	:
That	, a health spa, as Principal,
and	, a corporation, as Surety, are held
and firmly bound unto THE STATE OF	F WEST VIRGINIA, OFFICE OF ATTORNEY
GENERAL, in the just and full sum of FIF	TY THOUSAND DOLLARS (\$50,000.00), to
the payment whereof well and truly to	be made we bind ourselves, our executors,
administrators, successors and assigns, j	jointly and severally, firmly by these presents.
THE CONDITION of the above obli	gation is such that whereas, the above bound
Principal, in pursuance of the provisions	s of Chapter 46A, Article 1, Section 101, et
seq., as amended, of the Code of W	est Virginia, and the rules and regulations
promulgated thereunder, has registered	d to do business as a health spa, and said
Principal has accepted all duties and liab	oilities thereunto pertaining:
NOW, THEREFORE, if the said Pri	incipal shall faithfully perform its duties only
in conformity with the provisions of the a	aforesaid Law and rules and regulations, then
this obligation shall be considered void;	otherwise to remain in full force and effect.
This bond shall be effective from th	neday of, 20,
to the day of	, 20, and shall be automatically
renewed each year for a period of thre	ee (3) years, unless cancelled as hereinafter
provided. Surety may cancel this bond b	by giving thirty (30) days' prior written notice
to the Office of the Attorney General by	certified mail, return receipt requested.
IN WITNESS WHEREOF the said P	Principal has hereunto set its hand and affixed
its seal, and the said surety has caused	its corporate name to be signed and its
corporate seal to be affixed hereto this	day of, 20

PRINCIPAL (Health Spa)	(8)	SURETY (Bonding Company)
Signature of Principal (Must Be President or Vice President) <sup>1</sup>		Signature of Surety
Address of Principal	(10) <u> </u>	Address of Surety
ACKNOWLE  To be used if Principal is an individual or a		
State of	,	
County of,	to-wit:	
l,	, a N	lotary Public in and for the count
and state aforesaid, do hereby certify that _	<del> </del>	, whos
name is signed to the foregoing writing, ha	s this da	ay acknowledged the same before
me in my said county.		
Given under my hand this day	of	, 20
	<del></del>	Notary Public
(Notary Seal)		

## (To be used if Principal is a corporation.) State of \_\_\_\_\_\_, County of \_\_\_\_\_, to-wit: I, \_\_\_\_\_, a Notary Public in and for the county and state aforesaid, do hereby certify that , who as signed the foregoing writing for , (Title) a corporation, has this day in my said county before me acknowledged the same to be the act and deed of said corporation. Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_.² Notary Public (Notary Seal) My commission Expires \_\_\_\_\_\_. (To be used by Surety Corporation.) State of \_\_\_\_\_\_, County of \_\_\_\_\_, to-wit: I, \_\_\_\_\_, a Notary Public in and for the county and state aforesaid, do hereby certify that \_\_\_\_\_ , who as signed the foregoing writing for , a corporation, has this day in my said county before me acknowledged the same to be the act and deed of said corporation. Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_.² Notary Public (Notary Seal) My commission Expires \_\_\_\_\_

## **Attorney General's Approval**

	APPROVED as to sufficiency of form and manner of execution this day
of	, 20
	By:
	Assistant Attorney General

## Notes:

- 1. If signed by officer other than President or Vice President, a copy of corporate resolution must be attached showing authorization of individual to bind the corporation.
- 2. Notary enters date bond was acknowledged. May be same as signature date on line 4 or any date thereafter.
- **Power of attorney** for Surety must be attached and must show that it was in full force and effect on execution date indicated on line 4 of the Bond. A <u>raised</u> corporate seal must also be affixed to the power of attorney.